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A
PTO/SB/05 (2/98) (modified)

Approved for use through 9/30/2000, OMB 0651-0032

Patent and Trademark Office: U.S. DEPARTMENT OF COMMERCE

**NEW UTILITY
PATENT APPLICATION
TRANSMITTAL**

(only for new nonprovisional applications under
37 CFR 1.53(b))

Attorney Docket Number 19675-04521

First Named Inventor Jeremy T. Johnson et al.

Total Pages in this Submission 43

Express Mail Label No. EL541495066US

09/645011 PTO
09/645011 U.S. PTO

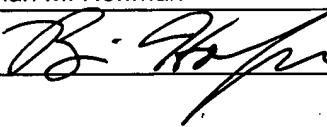
APPLICATION ELEMENTS

1. Fee Transmittal Form (in duplicate) Check Enclosed
2. Specification
(preferred arrangement set forth below)
 - Descriptive Title of the Invention
 - Cross Reference(s) to Related Case(s)
 - Statement Regarding Fed sponsored R & D
 - Background of the Invention
 - Brief Summary of the Invention
 - Brief Description of the Drawing(s)
 - Detailed Description
 - Claim or Claims
 - Abstract of the Disclosure
3. Drawing(s) (when necessary per 35 USC 113)
4. Oath or Declaration
 - a. New Declaration Executed
 - b. Copy from a prior application (37 CFR 1.63(d))
(for continuation/divisional with Box 17 completed)
 - i. DELETION OF INVENTOR(S)
Signed statement attached deleting inventor(s) named in the prior application, see 37 CFR 1.63(d)(2) and 1.33(b).
5. Incorporation by Reference (useable if Box 4b is checked). The entire disclosure of the prior application, from which a copy of the oath or declaration is supplied under Box 4b, is considered as being part of the disclosure of the accompanying application and is hereby incorporated by reference therein.

17. If a CONTINUING APPLICATION, check appropriate box and supply the requisite information below and in a preliminary amendment:
 Continuation Divisional Continuation-in-part (CIP) of prior application No: _____ / _____

Prior application information: Examiner: _____ Group/Art Unit: _____

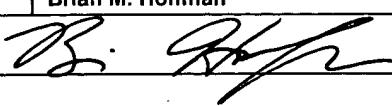
18. CORRESPONDENCE ADDRESS

| | | | | | |
|-------------------|---|-----------|----------------|-----------------------------------|--------------------|
| NAME | Brian M. Hoffman Fenwick & West LLP | | | | |
| ADDRESS | Two Palo Alto Square | | | | |
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| COUNTRY | U.S.A. | TELEPHONE | (415) 875-2484 | | FAX (415) 281-1350 |
| Name (Print/Type) | Brian M. Hoffman | | | Registration No. (Attorney/Agent) | 39,713 |
| Signature |  | | | Date | August 23, 2000 |

EXPRESS MAIL NO. EL541495066US

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| 0002/PTO(modified) Rev. 10/95 | U.S. Department of Commerce Patent and Trademark Office | <i>Complete if Known</i> | |
| FEE TRANSMITTAL | | Application Number | NEW |
| | | Filing Date | HEREWITH |
| | | First Named Inventor | Jeremy T. Johnson et al. |
| | | Group Art Unit | Unknown |
| | | Examiner Name | Unknown |
| TOTAL AMOUNT OF PAYMENT Subtotal (1) + Subtotal (2) + Subtotal (3) = (<u>\$ 820.00</u>) | | Attorney Docket Number | 19675-04521 |

| METHOD OF PAYMENT | | FEES CALCULATION (continued) | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
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| 1. The Commissioner is hereby authorized to: <ul style="list-style-type: none"> <input type="checkbox"/> Charge the indicated fees to the below mentioned deposit account. <input checked="" type="checkbox"/> Charge any additional fee required under 37 CFR 1.16 - 1.21 or credit any over payments to the below mentioned deposit account. [†] <input type="checkbox"/> Charge the Issue Fee set in 37 CFR 1.18 at the Mailing of the Notice of Allowance, 37 CFR 1.311(b) to the below mentioned deposit account. <p>Deposit Account Number: 19-2555 Deposit Account Name: FENWICK & WEST LLP</p> <p>A Duplicate Copy of this authorization is attached</p> | | 3. ADDITIONAL FEES <table border="1" style="width: 100%; border-collapse: collapse;"> <thead> <tr> <th style="text-align: left; width: 30%;">Large Entity</th> <th style="text-align: left; width: 30%;">Small Entity</th> <th style="text-align: left; width: 40%;">Fee Description</th> <th style="text-align: right; width: 10%;">Fee Due</th> </tr> </thead> <tbody> <tr><td>Fee Code/Fee</td><td>Fee Code/Fee</td><td></td><td></td></tr> <tr><td>105/\$130</td><td>205/\$65</td><td>Surcharge - late filing fee or oath</td><td></td></tr> <tr><td>127/\$50</td><td>227/\$25</td><td>Surcharge-late provisional filing fee or cover sheet</td><td></td></tr> <tr><td>147/\$2,520</td><td>147/\$2,520</td><td>For filing a request for reexamination</td><td></td></tr> <tr><td>115/\$110</td><td>215/\$55</td><td>Extension for response within first month[†]</td><td></td></tr> <tr><td>116/\$380</td><td>216/\$190</td><td>Extension for response within second month[†]</td><td></td></tr> <tr><td>117/\$870</td><td>217/\$435</td><td>Extension for response within third month[†]</td><td></td></tr> <tr><td>118/\$1,360</td><td>218/\$680</td><td>Extension for response within fourth month[†]</td><td></td></tr> <tr><td>128/\$1,850</td><td>228/\$925</td><td>Extension for response within fifth month[†]</td><td></td></tr> <tr><td>119/\$300</td><td>219/\$150</td><td>Notice of Appeal</td><td></td></tr> <tr><td>141/\$1,210</td><td>241/\$605</td><td>Petition to revive unintentionally abandoned application</td><td></td></tr> <tr><td>142/\$1,210</td><td>242/\$605</td><td>Utility Issue Fee (Or Reissue)</td><td></td></tr> <tr><td>143/\$430</td><td>243/\$215</td><td>Design Issue Fee</td><td></td></tr> <tr><td>122/\$130</td><td>122/\$130</td><td>Petitions to the Commissioner</td><td></td></tr> <tr><td>123/\$50</td><td>123/\$50</td><td>Petitions related to provisional applications</td><td></td></tr> <tr><td>126/\$240</td><td>126/\$240</td><td>Submission of Information Disclosure Statement</td><td></td></tr> <tr><td>581/\$40</td><td>581/\$40</td><td>Recording each patent assignment per property (times number of properties)</td><td style="text-align: right;">40</td></tr> <tr><td>146/\$690</td><td>246/\$345</td><td>Filing a submission after final rejection (37 CFR 1.129(a))</td><td></td></tr> <tr><td>149/\$690</td><td>249/\$345</td><td>For each additional invention to be examined (37 CFR 1.129(b))</td><td></td></tr> <tr><td colspan="2" style="text-align: center;">SUBTOTAL (1) <u>(\$ 690)</u></td><td colspan="2" style="text-align: center;">Other fee (specify):</td><td></td></tr> <tr><td colspan="2" style="text-align: center;">SUBTOTAL (2) <u>(\$ 90)</u></td><td colspan="2" style="text-align: center;">Other fee (specify):</td><td></td></tr> <tr> <td colspan="2"> 2. CLAIMS <table border="1" style="width: 100%; border-collapse: collapse;"> <thead> <tr> <th style="text-align: left; width: 30%;">Large Entity</th> <th style="text-align: left; width: 30%;">Small Entity</th> <th style="text-align: left; width: 40%;">Fee Description</th> </tr> </thead> <tbody> <tr><td>Fee Code/Fee</td><td>Fee Code/Fee</td><td></td></tr> <tr><td>103/\$18</td><td>203/\$9</td><td>Claims in excess of 20</td></tr> <tr><td>102/\$78</td><td>202/\$39</td><td>Independent claims in excess of 3</td></tr> <tr><td>104/\$260</td><td>204/\$130</td><td>Multiple dependent claim</td></tr> <tr><td>109/\$78</td><td>209/\$39</td><td>Reissue independent claims over original patent</td></tr> <tr><td>110/\$18</td><td>210/\$9</td><td>Reissue claims in excess of 20 and over original patent</td></tr> </tbody> </table> </td> <td colspan="3"> <table border="1" style="width: 100%; border-collapse: collapse;"> <thead> <tr> <th style="text-align: left; width: 20%;">For</th> <th style="text-align: left; width: 20%;">(Col. 1) No. of Existing Claims</th> <th style="text-align: left; width: 20%;">(Col. 2) Highest No. Previously Paid For</th> <th style="text-align: left; width: 20%;">(Col. 3) Extra**</th> <th style="text-align: left; width: 20%;">Fee</th> <th style="text-align: right; width: 10%;">Fee Due</th> </tr> </thead> <tbody> <tr><td>TOTAL</td><td>25</td><td>minus*</td><td>20 or 0</td><td>=</td><td>18</td></tr> <tr><td>INDEP</td><td>3</td><td>minus*</td><td>3 or 0</td><td>=</td><td>0</td></tr> <tr><td colspan="6" style="text-align: center;">[] First presentation of multiple dependent claim</td></tr> </tbody> </table> </td> </tr> <tr> <td colspan="2"></td> <td colspan="3" style="text-align: center;">SUBTOTAL (3) <u>(\$ 40)</u></td> </tr> <tr> <td colspan="2"></td> <td colspan="3" style="text-align: center;">SUBTOTAL (2) <u>(\$ 90)</u></td> </tr> <tr> <td colspan="4"> <small>* Subtract the greater number of Col. 2 ** If the difference between Col. 1 and Col. 2 is less than zero, then enter "0" in Col. 3</small> </td> <td></td> </tr> </tbody> </table> | | | Large Entity | Small Entity | Fee Description | Fee Due | Fee Code/Fee | Fee Code/Fee | | | 105/\$130 | 205/\$65 | Surcharge - late filing fee or oath | | 127/\$50 | 227/\$25 | Surcharge-late provisional filing fee or cover sheet | | 147/\$2,520 | 147/\$2,520 | For filing a request for reexamination | | 115/\$110 | 215/\$55 | Extension for response within first month [†] | | 116/\$380 | 216/\$190 | Extension for response within second month [†] | | 117/\$870 | 217/\$435 | Extension for response within third month [†] | | 118/\$1,360 | 218/\$680 | Extension for response within fourth month [†] | | 128/\$1,850 | 228/\$925 | Extension for response within fifth month [†] | | 119/\$300 | 219/\$150 | Notice of Appeal | | 141/\$1,210 | 241/\$605 | Petition to revive unintentionally abandoned application | | 142/\$1,210 | 242/\$605 | Utility Issue Fee (Or Reissue) | | 143/\$430 | 243/\$215 | Design Issue Fee | | 122/\$130 | 122/\$130 | Petitions to the Commissioner | | 123/\$50 | 123/\$50 | Petitions related to provisional applications | | 126/\$240 | 126/\$240 | Submission of Information Disclosure Statement | | 581/\$40 | 581/\$40 | Recording each patent assignment per property (times number of properties) | 40 | 146/\$690 | 246/\$345 | Filing a submission after final rejection (37 CFR 1.129(a)) | | 149/\$690 | 249/\$345 | For each additional invention to be examined (37 CFR 1.129(b)) | | SUBTOTAL (1) <u>(\$ 690)</u> | | Other fee (specify): | | | SUBTOTAL (2) <u>(\$ 90)</u> | | Other fee (specify): | | | 2. 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| Fee Code/Fee | Fee Code/Fee | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| 105/\$130 | 205/\$65 | Surcharge - late filing fee or oath | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| 127/\$50 | 227/\$25 | Surcharge-late provisional filing fee or cover sheet | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| 147/\$2,520 | 147/\$2,520 | For filing a request for reexamination | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| 115/\$110 | 215/\$55 | Extension for response within first month [†] | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| 116/\$380 | 216/\$190 | Extension for response within second month [†] | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| 117/\$870 | 217/\$435 | Extension for response within third month [†] | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| 118/\$1,360 | 218/\$680 | Extension for response within fourth month [†] | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
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| 119/\$300 | 219/\$150 | Notice of Appeal | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| 141/\$1,210 | 241/\$605 | Petition to revive unintentionally abandoned application | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| 142/\$1,210 | 242/\$605 | Utility Issue Fee (Or Reissue) | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| 143/\$430 | 243/\$215 | Design Issue Fee | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| 122/\$130 | 122/\$130 | Petitions to the Commissioner | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| 123/\$50 | 123/\$50 | Petitions related to provisional applications | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| 126/\$240 | 126/\$240 | Submission of Information Disclosure Statement | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| 581/\$40 | 581/\$40 | Recording each patent assignment per property (times number of properties) | 40 | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| 146/\$690 | 246/\$345 | Filing a submission after final rejection (37 CFR 1.129(a)) | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| 149/\$690 | 249/\$345 | For each additional invention to be examined (37 CFR 1.129(b)) | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| SUBTOTAL (1) <u>(\$ 690)</u> | | Other fee (specify): | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| SUBTOTAL (2) <u>(\$ 90)</u> | | Other fee (specify): | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| 2. CLAIMS <table border="1" style="width: 100%; border-collapse: collapse;"> <thead> <tr> <th style="text-align: left; width: 30%;">Large Entity</th> <th style="text-align: left; width: 30%;">Small Entity</th> <th style="text-align: left; width: 40%;">Fee Description</th> </tr> </thead> <tbody> <tr><td>Fee Code/Fee</td><td>Fee Code/Fee</td><td></td></tr> <tr><td>103/\$18</td><td>203/\$9</td><td>Claims in excess of 20</td></tr> <tr><td>102/\$78</td><td>202/\$39</td><td>Independent claims in excess of 3</td></tr> <tr><td>104/\$260</td><td>204/\$130</td><td>Multiple dependent claim</td></tr> <tr><td>109/\$78</td><td>209/\$39</td><td>Reissue independent claims over original patent</td></tr> <tr><td>110/\$18</td><td>210/\$9</td><td>Reissue claims in excess of 20 and over original patent</td></tr> </tbody> </table> | | Large Entity | Small Entity | Fee Description | Fee Code/Fee | Fee Code/Fee | | 103/\$18 | 203/\$9 | Claims in excess of 20 | 102/\$78 | 202/\$39 | Independent claims in excess of 3 | 104/\$260 | 204/\$130 | Multiple dependent claim | 109/\$78 | 209/\$39 | Reissue independent claims over original patent | 110/\$18 | 210/\$9 | Reissue claims in excess of 20 and over original patent | <table border="1" style="width: 100%; border-collapse: collapse;"> <thead> <tr> <th style="text-align: left; width: 20%;">For</th> <th style="text-align: left; width: 20%;">(Col. 1) No. of Existing Claims</th> <th style="text-align: left; width: 20%;">(Col. 2) Highest No. Previously Paid For</th> <th style="text-align: left; width: 20%;">(Col. 3) Extra**</th> <th style="text-align: left; width: 20%;">Fee</th> <th style="text-align: right; width: 10%;">Fee Due</th> </tr> </thead> <tbody> <tr><td>TOTAL</td><td>25</td><td>minus*</td><td>20 or 0</td><td>=</td><td>18</td></tr> <tr><td>INDEP</td><td>3</td><td>minus*</td><td>3 or 0</td><td>=</td><td>0</td></tr> <tr><td colspan="6" style="text-align: center;">[] First presentation of multiple dependent claim</td></tr> </tbody> </table> | | | For | (Col. 1) No. of Existing Claims | (Col. 2) Highest No. Previously Paid For | (Col. 3) Extra** | Fee | Fee Due | TOTAL | 25 | minus* | 20 or 0 | = | 18 | INDEP | 3 | minus* | 3 or 0 | = | 0 | [] First presentation of multiple dependent claim | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Large Entity | Small Entity | Fee Description | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Fee Code/Fee | Fee Code/Fee | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| 103/\$18 | 203/\$9 | Claims in excess of 20 | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| 102/\$78 | 202/\$39 | Independent claims in excess of 3 | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| 104/\$260 | 204/\$130 | Multiple dependent claim | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| 109/\$78 | 209/\$39 | Reissue independent claims over original patent | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| 110/\$18 | 210/\$9 | Reissue claims in excess of 20 and over original patent | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| For | (Col. 1) No. of Existing Claims | (Col. 2) Highest No. Previously Paid For | (Col. 3) Extra** | Fee | Fee Due | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| TOTAL | 25 | minus* | 20 or 0 | = | 18 | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| INDEP | 3 | minus* | 3 or 0 | = | 0 | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| [] First presentation of multiple dependent claim | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| | | SUBTOTAL (3) <u>(\$ 40)</u> | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| | | SUBTOTAL (2) <u>(\$ 90)</u> | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| <small>* Subtract the greater number of Col. 2 ** If the difference between Col. 1 and Col. 2 is less than zero, then enter "0" in Col. 3</small> | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |

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|-----------------------|---|---------------------------------|-----------------|
| SUBMITTED BY | | <i>Complete (if applicable)</i> | |
| Typed or Printed Name | Brian M. Hoffman | Reg. Number | 39,713 |
| Signature |  | Date | August 23, 2000 |